

**2012 Bear Creek Church
Informed Consent and Hold Harmless Agreement (waiver)
for Middle School and High School**

Recognizing a certain degree of risk inherent in some youth activities, I hereby accept these risks and agree to my student's participation in activities offered through Bear Creek Church, 3101 S. Kipling St., Lakewood, CO 80227.

I also hold the Bear Creek Church, its employees, and the adult volunteer leaders and parents participating in these events, harmless in the event of any accident or injury that might occur to

_____ (my child's first & last name)

_____ (2nd child)

_____ (3rd child)

_____ (4th child).

This includes holding Bear Creek Church, its employees, and the adult volunteer leaders and parents harmless from all actions, claims, costs, expenses, or damages of any kind, growing out of or related to any activity of the church. I have given my child my consent to participate in all activities organized through the Bear Creek Church youth staff and volunteers.

I also authorize any adult leader or volunteer to call a licensed doctor or practitioner to administer medical aid and/or treatment for my student at any given time when they believe an emergency exists. This would include all treatments such as medication, x ray, anesthetic, minor and major or dental surgery, and the like. I further agree to reimburse said adult or the church for any medical expenses incurred on my child's behalf.

Insurance: I realize the Church insurance begins where the individual's health and accident policy terminates. It is only valid when all other insurance has been extended to the limits. _____ (initial)

Personal Belongings: I realize the Church is not responsible for personal belongings. _____ (initial)

Transportation: I give my permission for my child to be transported to and from this retreat and any other church-sponsored activities in a Church, rental, or private vehicle. Drivers who transport students (besides their own family members) for our youth events must be at least 21 years of age. _____ (initial)

Discipline: In the event of repeated misconduct, I authorize the staff to send my child home at my expense, after making effort to contact me. _____ (initial)

Parent / Guardian Signature:

Phone #

or

Parent / Guardian (please print):

(alternate phone #)

Date:
